

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Gerald P. O'Hara, Jr., Steve Gara, Christian E. Thorne, Tom Watters, Dennis Briggs, Mike Hutchinson and Scott P. Martin

For: BLOOD SEPARATION APPARATUS AND METHOD OF USING THE SAME

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is for the following type of application:

(check one applicable item below)

<input type="checkbox"/> Original	<input type="checkbox"/> Divisional
<input type="checkbox"/> Continuation	<input type="checkbox"/> U.S. National Stage of PCT
<input checked="" type="checkbox"/> Continuation-in-Part	

My residence, post office address and citizenship are as stated below next to my name; and I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a

☒ Utility Patent -- Design Patent

is sought on the invention, whose title appears above, the specification of which:

☒ is attached hereto

☐ was filed on _____, as U.S. Serial Number _____

☐ and was amended on _____ *(if applicable)*

☐ was described and claimed in Application Number _____, filed on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to be material to the patentability of this application in accordance with 37 CFR § 1.56.

**DISCLOSURE AND/OR CLAIM FOR PRIORITY UNDER
35 U.S.C. §§ 119(a)-(d) OF FOREIGN APPLICATIONS
FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN)
OF THIS APPLICATION**

I hereby claim foreign priority benefits under Title 35, United States Code §§ 119(a)-(d) of any foreign applications for patent, inventor's certificate or PCT international application designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent, inventor's certificate or any PCT international application designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

Country (or indicate if PCT)	Application Number	Date of Filing (day, month, year)	Priority Claimed Under 37 USC 119a-d
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

**DISCLOSURE OF FOREIGN APPLICATION(S) IF ANY,
FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN)
PRIOR TO THE FILING OF THIS APPLICATION**

Country (or indicate if PCT)	Application Number	Date of Filing (day, month, year)

**CLAIM FOR PRIORITY OF UNITED STATES APPLICATIONS
OR PCT APPLICATIONS FILED
IN THE UNITED STATES RECEIVING OFFICE
UNDER 35 U.S.C. §120**

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to be material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Date Filed	Status Patented/Pending/Abandoned
10/375,628	February 27, 2003	Pending

**CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)
UNDER 35 U.S.C. § 119(e)**

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date
60/361,287	March 4, 2002

POWER OF ATTORNEY

I hereby appoint all the practitioners associated with Customer Number 34132 (which is the Customer Number assigned to Cozen O'Connor to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith. Each practitioner associated with Customer Number 34132 is an attorney registered before the United States Patent and Trademark Office.

Address all correspondence and maintenance fee correspondence to the address identified in Customer No. 34132 which is assigned to Cozen O'Connor, 1900 Market Street, Philadelphia, PA 19103.

Direct all telephone calls to: Michael B. Fein, Esq.

Cozen O'Connor
1900 Market Street
Philadelphia, PA 19103
Telephone No.: (215) 665-4622
Facsimile No.: (215) 665-2013

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor

Gerald
(Given Name)

P.
(Middle Initial or Name)

O'Hara, Jr.
Family (or last name)

City/State of Actual Residence: Thorndale, Pennsylvania

Mailing Address: 12 Fairway Lane, Thorndale, Pennsylvania 19372

Country of Citizenship: United States of America

Inventor's signature: _____

Date: _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor

Steve
(Given Name)

(Middle Initial or Name)

Gara
Family (or last name)

City/State of Actual Residence: Collegeville, Pennsylvania

Mailing Address: 810 Red Coat Road, Pennsylvania 19426

Country of Citizenship: United States of America

Inventor's signature: _____

Date: _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor

Christian E. Thorne
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City/State of Actual Residence: Temple, Pennsylvania

Mailing Address: 3 Poplar Avenue, Temple, Pennsylvania 19560

Country of Citizenship: Canada

Inventor's signature: _____

Date: _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor

Tom _____ Watters
(Given Name) (Middle Initial or Name) Family (or last name)

City/State of Actual Residence: Malvern, Pennsylvania

Mailing Address: 10 Lapp Road, Malvern, Pennsylvania 19355

Country of Citizenship: Ireland

Inventor's signature: _____

Date: _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventorDennis*(Given Name)*(Middle Initial or Name)Briggs*Family (or last name)***City/State of Actual Residence:** West Chester, Pennsylvania**Mailing Address:** 1570 Tattersall Way, West Chester, Pennsylvania 19380**Country of Citizenship:** United States of America**Inventor's signature:** _____**Date:** _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventorMike*(Given Name)*(Middle Initial or Name)Hutchinson*Family (or last name)***City/State of Actual Residence:** King of Prussia, Pennsylvania**Mailing Address:** 791 Caley Road, King of Prussia, Pennsylvania 19406**Country of Citizenship:** United States of America**Inventor's signature:** _____**Date:** _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventorScott*(Given Name)*P.*(Middle Initial or Name)*Martin*Family (or last name)***City/State of Actual Residence:** Collegeville, Pennsylvania**Mailing Address:** 902 Muhlenberg Drive, Collegeville, Pennsylvania 19426**Country of Citizenship:** United States of America**Inventor's signature:** _____**Date:** _____